

## Joint Conference Committee Regulatory Affairs Status Report for January 2023 Meeting



### I. PENDING SURVEYS

Survey	Frequency	Anticipated Timeframe
CMS Outpatient Dialysis Recertification	Annual	Unannounced anytime/ overdue since 2019
CMS 4A Recertification Survey	Annual	Unannounced anytime / overdue since 2021
CMS 4A Fire Life Safety Survey	Annual	Occurs after recertification
CDPH 4A Licensing	Triennial	Unannounced anytime / overdue since 2022
CDPH General Acute Care Hospital Licensing	Triennial	Approaching / 2023
TJC Hospital Accreditation and Nursing Care Center Surveys	Triennial	Approaching / November 7, 2022-May 7, 2023
TJC Stroke (note: TBI Certification retiring)	Biennial	Approaching / December 16, 2022-March 18, 2023
American College of Surgeon Level 1 Trauma Certification	Triennial	Approaching / June 2023
Baby-Friendly Hospital Status Recertification	5 Year Cycle	Approaching / March 2023

### II. COMPLETED SURVEYS

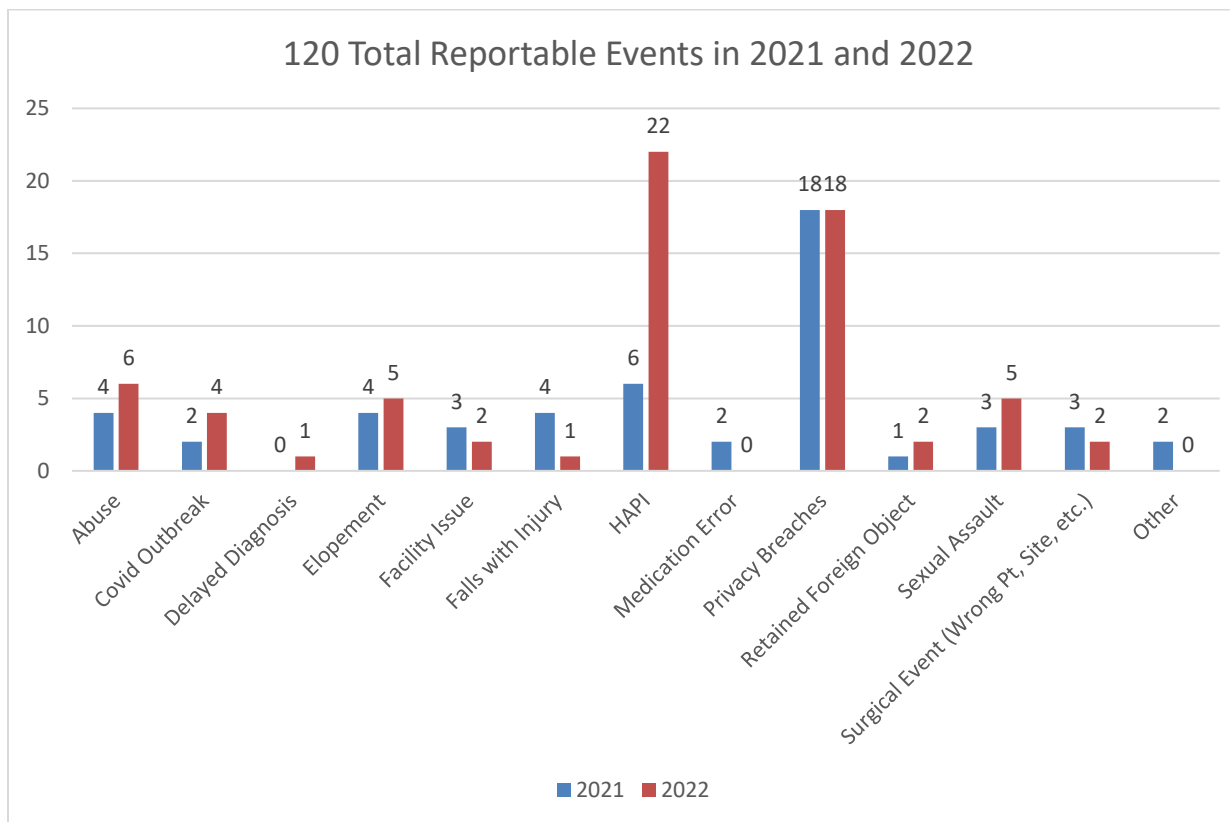
Survey Date	Agency	Location Surveyed	Details
11/15/2022	Department of Healthcare Services (DHCS)	Multiple locations (5 sites): Office Based Opioid Treatment Program (OBOT)	This is a routine audit. Inspection of Mobile Vans occurred again; No Major findings.
12/6/2022	Board of State and Community Corrections (BSCC)	Jail Health System: CJ1, CJ2, CJ3, Court Holding Cells, Police Stations	This is an annual inspection completed to assess compliance with Title XV. There are 3 components including medical/mental, nutrition, and environmental evaluation completed by ZSFG in collaboration with DPH Environmental Health Branch
1/12/2022	California Department of Public Health (CDPH)	COVID-19 Vaccination Clinic	This was a quality assurance visit for the mass vaccination clinic. There is one expected corrective action regarding temperature excursions of less than 15 minutes, which can occur during delivery and re-stocking of vaccine supply. Reviewers were impressed with the organization and commended all efforts.

### III. PLANS OF CORRECTION SUBMITTED

- NO NEW Plans of Correction submitted

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## IV. OPEN CDPH CASES – Facility Reported Events



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### V. NEW FACILITY REPORTED INCIDENTS (FRI)

COMPLAINT: submitted by public.

FRI: Facility Reported Incident.

ABUSE: Long Term Care CMS

self report

#### 13 New Reportable Incidents (11/11/2022 – 1/13/2023): 6 HAPI, 1 Covid Outbreak, 3 Privacy Breach, 2 Abuse, 1 Surgical Event

Date Submitted:	Date of Incident	Location	Event Details
11/22	11/16	H62	Covid Outbreak – 3 patients and 6 employees
11/23	11/15	ED	Privacy Breach
11/28	11/23	H34	HAPI – Stage 3
11/28	11/23	H38	HAPI – Stage 3
11/28	11/23	H38	HAPI - Unstageable
11/30	11/25	4A	Abuse
12/2	12/1	H54	HAPI – Stage 3
12/9	12/6	PACU	Surgical Event – Death within 24 of anesthesia
12/13	11/15	ED	Privacy Breach
12/14	12/12	H42	HAPI – Stage 3
12/22	12/9	PES	Abuse
1/3	12/28	H76	HAPI - unstageable
1/12	12/16	FHC	Privacy

### VI. PLAN OF CORRECTION MONITORING DATA

Survey (year) or Event (date of incident)	Finding Requiring Monitoring	Monitoring
FRI: Belmont Rapid Infuser (4.3.21)	Two employees did not have HIPPA/ Confidentiality Training completed in their file	➤ DPH Completion rate as of December is 95.6%. Pending updated completion numbers from UCSF. Ongoing monitoring required.
TJC Hospital Lab Survey (6.2022)	No evidence in the patient record that a critical value was called to the provider.	➤ Reporting tool being developed, and this item will continue to be watched
	Missing competency documentation for separate CLIA licenses.	➤ Training and competency was repeated for the second CLIA lab license; System is now in place to validate competency as checked by the POCT Coordinator or CLS staff before approval and access is given to the appropriate instrument; Records of separate training and competency for the same staff on the same instrument are maintained